

Table VI. Antifungal Prophylaxis

Intervention	Indication	Dose and Administration		Comments
		First Choice	Alternative	
Antifungal Prophylaxis for Candida infections	All Patients	<p>Adults: Fluconazole* 400 mg PO or IV daily</p> <p>Peds: Fluconazole* 12 mg/kg PO or IV daily, to a maximum dose of 400 mg/day</p>	<p>In case of fluconazole hepatotoxicity, avoid triazoles and contact ID service.</p> <p>CONSIDER Caspofungin 70 mg IV loading dose on day 1, followed by caspofungin 50 mg IV daily on subsequent days</p>	<p>Begin with conditioning regimen; continue until day +100</p> <p>AND until immune suppression is completed or until an alternative antifungal agent is started.</p>
^a Antifungal prophylaxis against Aspergillus	Patients with GVHD who are receiving steroids with methyl-prednisolone at a dose ≥ 1 mg/kg per day or another glucocorticoid ^b at equipotent doses for ≥ 6 days	<p>Adults:</p> <p>Voriconazole* 6 mg/kg IV q12 h X2 doses, then Voriconazole* 3 mg/kg IV q12 h – transition to Voriconazole 200 mg PO q12 h as tolerated.</p> <p>OR</p> <p>Voriconazole 400 mg PO q12 h X2 doses, then voriconazole 200 mg PO q12 h as tolerated.</p> <p>OR</p> <p>Caspofungin 70 mg IV loading dose on day 1, then caspofungin 50 mg IV daily on subsequent days.</p> <p>Peds: (<50kg)^e</p> <p>Voriconazole* 6 mg/kg IV q12 h X2 doses, then 4 mg/kg IV q12 h.</p> <p>OR</p> <p>Voriconazole 4 mg/kg PO q12 h rounded to the nearest 50 mg tablet to a maximum dose of 200 mg q12 h.</p>	<p>Amphotericin B lipid complex injection (Abelcet®, ABLC) 5 mg/kg IV daily</p>	<p>Continue antifungal prophylaxis with activity against Aspergillus until methylprednisolone or another glucocorticoid^b at equipotent dosages is ≤ 0.6 mg/kg/d^c</p> <p>OR</p> <p>A daily dose is achieved of prednisone < 30 mg/d (or another glucocorticoid at an equipotent dose)^d</p> <p>Intravenous voriconazole should be avoided in patients with creatinine clearance < 50 mL/min due to accumulation of an excipient product used in the IV product formulation.</p>

^a Prophylaxis with voriconazole, Abelcet®, or caspofungin as recommended in the table is experimental at this time. The recommendations are based upon data extrapolated from clinical trials and evidence from pre-clinical studies.

Steroid threshold doses for starting and discontinuing antifungal prophylaxis

^b methylprednisolone ≥ 1 mg/kg	=	dexamethasone ≥ 0.19 mg/kg
		hydrocortisone ≥ 5 mg/kg
		prednisone ≥ 1.25 mg/kg
^c methylprednisolone < 0.6 mg/kg	=	dexamethasone < 0.11 mg/kg
		hydrocortisone < 3 mg/kg
		prednisone < 0.75 mg/kg
^d prednisone < 30 mg	=	dexamethasone < 4.5 mg
		hydrocortisone < 120 mg
		methylprednisolone < 24 mg

^e Voriconazole is investigational in children. Current dosage recommendations are based upon pharmacokinetic data in pediatric patients.

* Requires dose or schedule modification in renally impaired patients.